



**G&G Garbage, LLC
CREDIT APPLICATION**

Please remit completed information via email to cgaub@gandggarbage.com

SERVICE LOCATION INFORMATION

Location Name:

Location Address:

Location Phone:

Fax:

E-mail:

Location City:

Requested service date:

State:

ZIP Code:

BUSINESS AND CREDIT INFORMATION

Company Name:

Sole proprietorship:

Partnership:

Corporation:

Other:

Billing Address:

City:

Date business commenced:

State:

ZIP Code:

Telephone:

Fax:

E-mail:

Bank Name:

Bank Address:

Phone:

Contact:

City:

State:

ZIP Code:

Savings

Account number:

Checking

Account number:

Credit Card Number:

Expiration Date:

BUSINESS/TRADE REFERENCES

Company name:

Address:

City:

State:

Zip Code:

Phone:

Fax:

E-mail:

Type of account:

Company name:

Address:

City:

State:

Zip Code:

Phone:

Fax:

E-mail:

Type of account:

Company name:

Address:

City:

State:

Zip Code:

Phone:

Fax:

E-mail:

Type of account:

AGREEMENT

1. All invoices are to be paid 14 days from the date of the invoice unless otherwise approved.
2. Claims arising from invoices must be made within seven working days.
3. Past due invoices are subject to a 2% per month penalty charge for unpaid balances.
4. Invoices requiring postal mailing are subject to a \$2.50 service charge.
5. By submitting this application, you authorize G&G Garbage, LLC to make inquiries into the banking and business/trade references that you have supplied.
6. Customer agrees to pay reasonable attorney's fees and court costs should Company initiate litigation and (or) collection action to recover monies (i/e; attorney's fee's, collection cost & fee's, finance charges, and NSF check fees) owing by Customer.
7. Credit Card number is required for all residential customers with a minimum pre-authorization of \$300 at time of scheduling.

SIGNATURES

Title:
Date:

Title:
Date: